



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E259656**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

CASE #	13-01844
LOCAL AGENCY CODING	
TOTAL # OF UNITS	02
OBJECT STRUCK	

M M D D Y Y Y Y	TIME (2400)	COUNTY #	MILES	CITY #
DATE OF COLLISION 07 - 29 - 2013	0840	31		0664
N S E W IN OF				

ON (PRIMARY TRAFFIC WAY) INTERSECTION <input type="checkbox"/> NON-INTERSECTION <input checked="" type="checkbox"/>		
LUNDEEN PARK WAY	BLOCK NO.	
	MILE POST	

DISTANCE	OF (REFERENCE OR CROSS STREET)
12 00 MILES <input checked="" type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input checked="" type="checkbox"/> W	SR 204

UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/> PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4254469145
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LAST NAME	TROTTS	FIRST NAME	KATHLEEN	MIDDLE INITIAL	N
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STREET NEW ADDRESS	108 1/2 S KENTUCKY ST UPPER
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CITY	GRANITE FALLS	ST	WA	ZIP	982529217
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	TROTTKN049KD	STATE	WA	SEX	F	D.O.B. MMDDYYYY	05 - 04 - 1996
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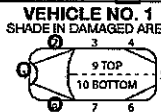
ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 1	NATURE OF INJURIES
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LICENSE PLATE #	591XLX	STATE	WA	VIN#	JH4DA3451KS018180
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1989	MAKE	ACUR	MODEL	INTEGR	STYLE	2H	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO. WILLIAM TROTTS PO BOX 218 GRANITE FALLS WA 98252											

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GMAC 2001562347		
VEHICLE LEGALLY STANDING YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #	3Z0512378	CHARGE	48.20.215



UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/> PEDAL CYCLE <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE D: 4252932757
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LAST NAME	WESTLING	FIRST NAME	THOMAS	MIDDLE INITIAL	D
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STREET NEW ADDRESS	712 S GRANITE AVE
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CITY	GRANITE FALLS	ST	WA	ZIP	982529703
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	WESTLTD406QK	STATE	WA	SEX	M	D.O.B. MMDDYYYY	11 - 12 - 1960
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ON DUTY <input type="checkbox"/>	STATUS	AIRBAG 2	RESTR. 4	EJECT 1	HELMET USE	INJURY CLASS 7	NATURE OF INJURIES SORE NECK/BACK
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LICENSE PLATE #		STATE		VIN#	1D8HN44H88B181281
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2008	MAKE	DODG	MODEL	CARAVA	STYLE	VN	VEHICLE TOWED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
REGISTERED OWNER INFO. OWNED BY DRIVER											

LIABILITY INSURANCE IN EFFECT <input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ESURANCE INSURANCE SERVICES PAWA-004396370		
VEHICLE LEGALLY STANDING YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	



OFFICER'S NAME (PRINT)	DENNIS IRWIN	BADGE OR ID #	105	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E259656**

CASE # **13-01844**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		RAMSEY JESSIKAH R																
ADDRESS & PHONE #		1918 WALL ST EVERETT WA 982013665																
SEX		F		D.O.B. MMDDYYYY		10		15		1987								
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES SORE NECK/BACK
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MMDDYYYY														NATURE OF INJURIES
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
SEX				D.O.B. MMDDYYYY														NATURE OF INJURIES
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

UNIT #2 was southbound on Lundeen Park Way and had stopped for a pedestrian at SR 204 when he was struck from behind by UNIT #1.

UNIT #1 had also southbound on Lundeen Park Way and was traveling behind Unit #2. UNIT #1 failed to notice that UNIT #2 had come to a stop and struck UNIT #2

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

DENNIS IRWIN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

07-29-13 11:35 AM

DATED

PLACE SIGNED

APPROVED BY

BOB SUMMERS 079

DATE

7/29/2013 2:33:58 PM

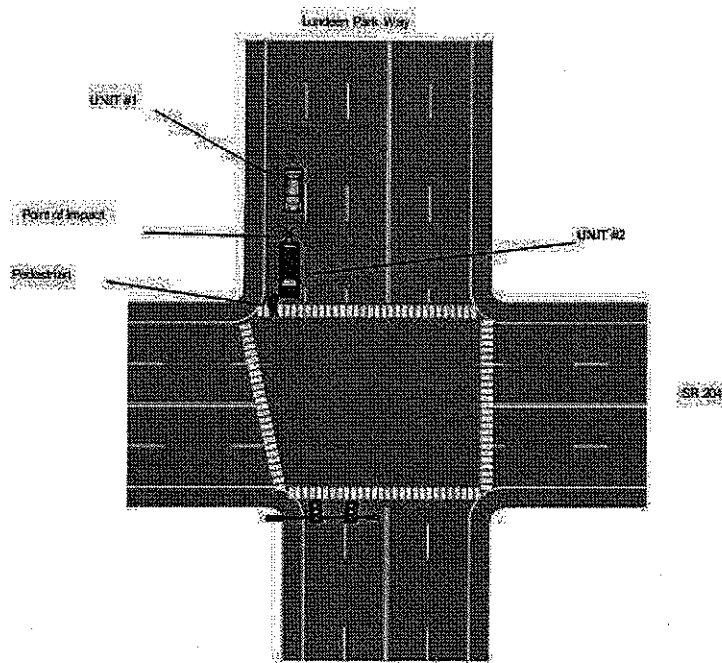
BADGE OR ID # **105**

ORI #

WA0311900

TIME POLICE DISPATCHED **8:41 AM**

TIME POLICE ARRIVED **8:43 AM**



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

1301844

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) TROTT Kathleen N	RACE W	ETH	SEX F	DOB 05-04-96	AGE 17	HGT 57	WGT 135	HAIR BRN	EYES BIO
STREET ADDRESS 105 1/2 S. Kentucky Ave		CITY Granite Falls		STATE WA		ZIP 98282		RES. STATUS		
HOME PHONE N/A		CELL PHONE 425 446 9145		PLACE OF EMPLOYMENT H.S. Espresso						
WORK PHONE N/A		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEM(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I WAS driving up Lundgren parkway, coming up to ~~the~~ the light on 204, and I entered the right turn lane to get ready to turn onto 204, the van in front of me immediately slammed on their breaks, for a pedestrian who had ~~not~~ just entered the ~~road~~ road from across the way. I immediately slammed on my breaks, and my car failed to stop in time, and I rear ended the van.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED JULY 29 13	LOCATION SIGNED
OFFICER/NUMBER: #105	DATE SIGNED 7/29/13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-01844

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) WESTLING, THOMAS DEAN	RACE W	ETH	SEX M	DOB 11-12-1960	AGE 52	HGT 5'10"	WGT 250	HAIR BRN	EYES HAZ
STREET ADDRESS 712 S. GRANITE AVE		CITY GRANITE FALLS		STATE WA		ZIP 98252		RES. STATUS LIFE US		
HOME PHONE 360-691-4946		CELL PHONE 425-293-2757			PLACE OF EMPLOYMENT SELF					
WORK PHONE		EMAIL ADDRESS								

I, THOMAS WESTLING, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEM(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I WAS DRIVING ON LUNPEENING GOING TOWARDS 204. TAKING RIGHT HAND TURN, ^{DOWN TO 204} GOING SOUTH. CAR BEHIND HAD BEEN TAILGATING FROM HIGHWAY 92. I STOPPED FOR PERSON CROSSING IN CROSSWALK AND ABOUT 3 TO 4 SECONDS LATER CAR BEHIND US HIT US AND SHOVED MY VAN 5 TO 6 FEET. I PULLED OVER ON THE SHOULDER AND CALLED 911. WHILE I WAS ON THE PHONE THE GIRL GOT OUT OF THE CAR AND KNOCKED ON PASSENGER WINDOW. MY DAUGHTER, JESSIKAH RAMSEY ROLLED DOWN THE WINDOW AND THE GIRL ASKED IF I WAS ON THE PHONE WITH 911? JESSIKAH SAID I WAS AND SHE STARTED CRYING SAYING SHE DIDNT HAVE A LICENSE AND WALKED BACK TO HER CAR, AND WAITED FOR POLICE.

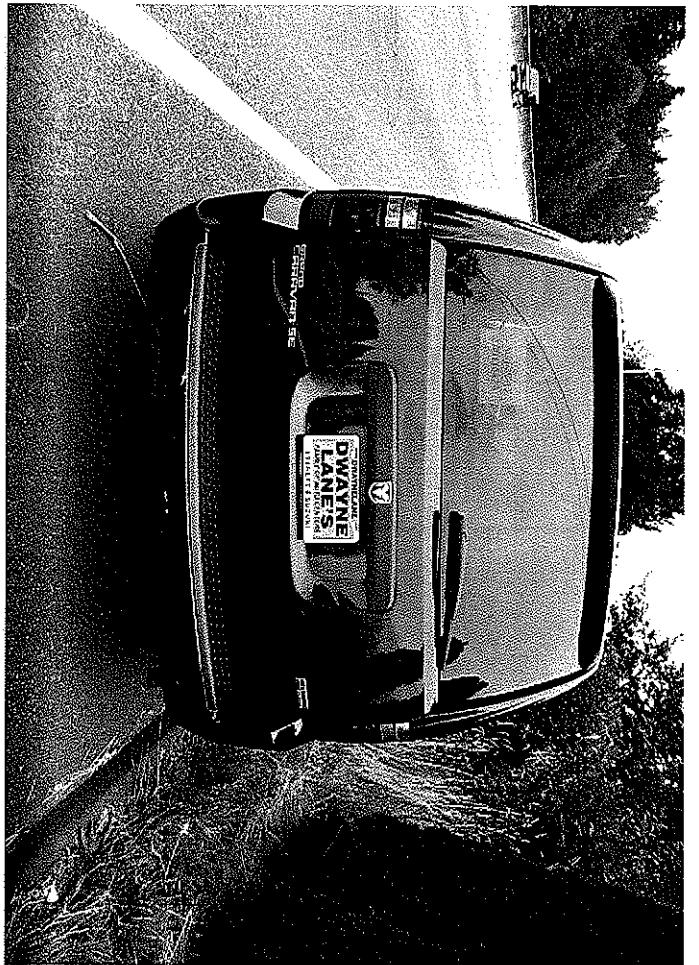
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Thomas Westling</u>	DATE SIGNED 7-29-2013	LOCATION SIGNED HWY 204
OFFICER/NUMBER: <u>#105</u>	DATES SIGNED 7/29/13	LOCATION SIGNED LAKE STEVENS WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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13-01844

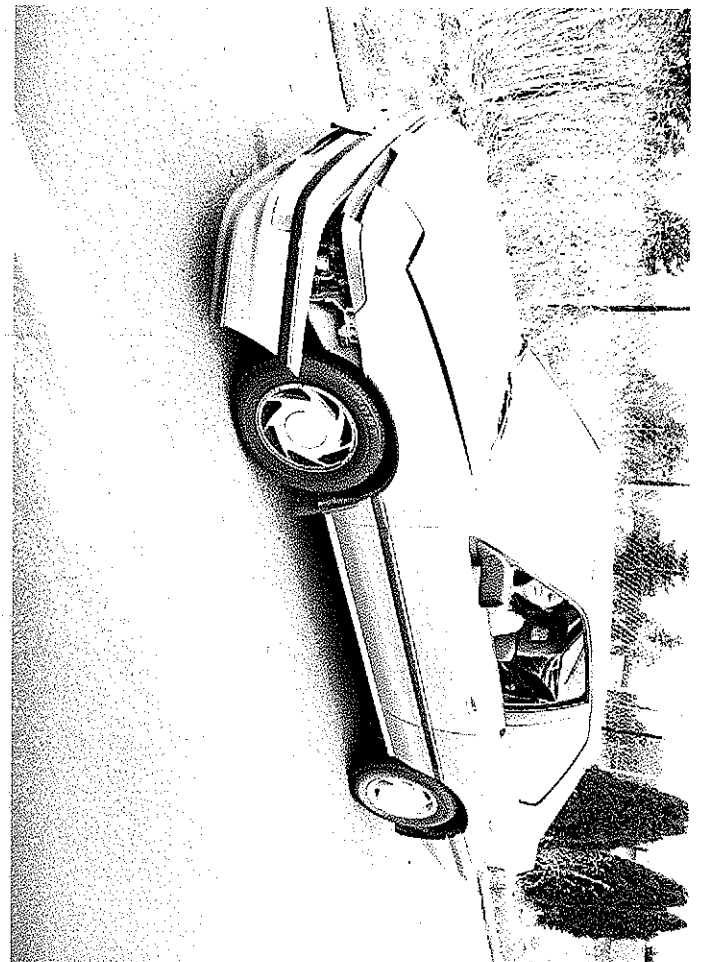
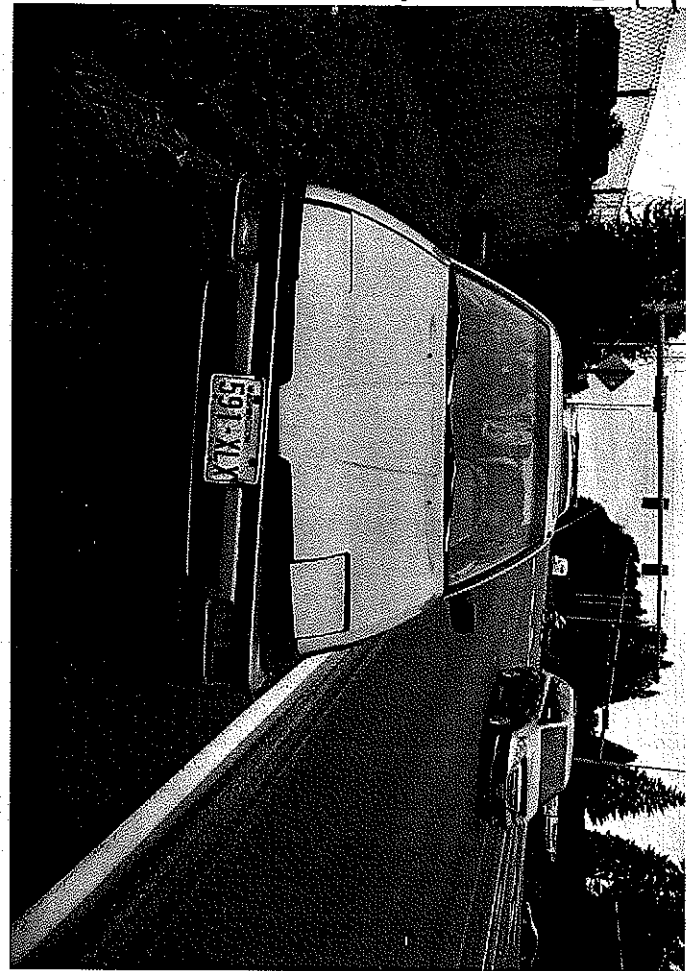


1/3



103

13-01844



82105

2/3

13-01844



SE 105

3/3

LSPD
ORIGINAL

Incident History for: #SS13017005

Case Numbers: \$\$\$13001844

Entered 07/29/13 08:41:22 BY SPCT08 SP0326

Dispatched 07/29/13 08:41:40 BY SPDP17 SP0147

Enroute 07/29/13 08:41:40

Onscene 07/29/13 08:43:21

Closed 07/29/13 09:30:23

Initial Type: ACC Initial Alarm Level: Final Alarm Level:

Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397D-1 Group: SS1 Beat: WEST

Src: T

Loc: MARKET PL/SR 204 , LKS (V)

Loc Info: PULLED OVER RIGHT SHOULDER, SB ON SR204

Name: WESTING, THOMAS

Addr:

Phone: 4252932757

/0841 (SP0326) ENTRY , 2 VEH REARENDER, NON BLKING, NON INJ, BLU 2008 DOD
GE CARAVAN VS BLU PC
/0841 CHANGE LOCI: PULLED OVER RIGHT SHOULDER, SB --> PULLED
OVER RIGHT SHOULDER, SB ON SR204
/0841 (SP0147) DISPER SS1936 #SS105 IRWIN, OFFICER (DENNIS)
/0843 ONSCNE SS1936
/0851 ASNCAS SS1936 \$\$\$13001844
/0904 (SS105) REMINQ SS1936 MDTWANT, TROTTS, KATHLEEN, N, 050496,,, WA, , , , , , , , , , ,
/0914 (SP0147) NEWLOC SS1936 [PAPER]
/0914 MISC SS1936 , PRIVATE TOW ENRT
/0930 CLEAR SS1936 D/H
/0930 CLOSE SS1936

LSPD
ORIGINAL